

**UTILITY SERVICE AGREEMENT
ELECTRIC / WATER / GAS**

Account # _____

Applicant: _____

Applicants Social Security No: ____-____-____

Driver's License: (Copy on back)

Co-Applicant: _____

Co-Applicants Social Security No: ____-____-____

Driver's License: (Copy on back)

Service Address: _____

Mailing Address: _____

(If different than service address)

Owner/Rental _____

Landlord (name and address)

Phone: (Home) _____ (Work): _____

In case of emergency, notify: _____ Phone: _____

We/I the above mentioned, authorize The City of Burlingame to provide ☐ Electric ☐ Water ☐ Gas Service to the above address. We/I also understand that all Utility Bills are due upon receipt and must be paid in full

by 5 P.M. on the 15th day of the month, after which a 5% penalty will be charged and a termination notice sent with copy to Landlord if applicable. If service is disconnected, for any reason, a \$20.00 shut off fee and any delinquent amount must be paid before service is resumed. Owner Utility Deposit plus interest will be refunded by application to the December Utility bill after a 12 month period of no penalty. Rental Utility Deposit plus interest will be refunded by application to the Final Bill. If a service deposit has been waived or refunded, a full deposit may be requested if more than two penalties have been applied.

Deposit Requested: _____

I certify that all information is accurate to the best of my knowledge.

Signature of Applicant_____
Date